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Effective on 12/08/2004.

| FEE TRANSIWIT AL Filing Date 11/25/2003 First Named Inventor Peter V. Czipott Examiner Name Bot LeDynh Art Unix 2862 Attorney Docket No. MED/US-53 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (picase identify): Deposit Account Deposit Account Number: Deposit Account Deposit Account Number: Credit and Service of Carde of Money Order Other (picase identify): Deposit Account Deposit Account Number: Charge fee(s) indicated below Credit and information of the form may become public. Credit card information should not be included on this form. Provide credit card information are always and information and submission on this form may become public. Credit card information should not be included on this form. Provide credit card information are always and informat | | Application Number | | 10/723,457 | | | | | | |
|---|---|--------------------|-----------------|------------|----------------------|---|------------------|------|----------------|---|
| Applicant claims small entity status. See 37 CFR 1.27 Art Unit 2862 | | | | | Filing Date | | 11/25/20 | | | |
| Art Unit 2862 Attorney Docket No. MED/US-53 | | | | | First Named Inventor | | Peter V. Czipott | | | |
| Actionary Docket No. 2862 | | | | | Examiner Name | | Bot LeDynh | | | |
| METHOD OF PAYMENT (check all that apply) □ Check □ Credit Card □ Money Order □ None □ Other (please identify): □ Deposit Account Deposit Account Number: □ Deposit Account Name: □ For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) □ Charge fee(s) indicated below □ Charge fee(s) indicated below, except for the filling fee □ Charge any additional fee(s) or underpayments of fee(s) □ Credit any overpayments WARNING: Information and authorization on F11-6 and 1.17 WARNING: Information and understance on T11-6 and 1.17 | Applicant claims small entity status. See 37 CFR 1.27 | | | | | | 2862 | | | |
| Check | TOTAL AMOUN | Attorney Docke | t No. | MED/US-53 | | | _ | | | |
| Deposit Account Number | METHOD OF I | PAYMENT (che | ck all that app | oly) | | | | | <u></u> | |
| Deposit Account Number: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee EXAMINATION FEES Small Entity Fee (S) | Check Credit Card Money Order None Other (please identify): | | | | | | | | | |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below | Denosit Ad | | - | | | | | • | | - |
| Charge fee(s) indicated below. Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES SMAIL Entity Fee (\$) Fee (\$ | - | | | | | | | oly) | | _ |
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| WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION | Ch | | | | | | | | | |
| Information and authorization on PTO-2038. FEE CALCULATION | Lunder 37 CFR 1 16 and 1 17 | | | | | | | | | |
| Application Type | information and authorization on PTO-2038. | | | | | | | | | |
| Filing FEES Small Entity Fee (\$) Fee (| FEE CALCUL | ATION | | | | | | | | |
| Note | | | | | | | | | | |
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| Design 200 100 100 50 130 65 | | | | | | | | | rees Paid (\$) | |
| Plant 200 100 300 150 160 80 | • | | | | | | | - | | |
| Reissue 300 150 500 250 600 300 Provisional 200 100 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | | | | | | | | | |
| Provisional 200 100 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | | | | | | - | - | | |
| 2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claims over 3 (including Reissues) Each independent claims Total Claims Total Claims Extra Claims Fee (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof - 100 = /50 = (round up to a whole number) x = 4. OTHER FEE(\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Terminal Disclaimer Registration No. (Attorney/Agent) 32,843 Telephone (360)692-4506 | | _ | | | | | | - | - | |
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| Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims Total Claims Extra Claims - 20 or HP = | | | | | | | <u>F</u> | | | |
| Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims Fee (\$) Fee Paid (\$) APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) Fee | Each claim over 20 (including Reissues) 50 25 | | | | | | | | | |
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| - 20 or HP = | | | | | | | | | | |
| HP = highest number of total claims paid for, if greater than 20. Indep. Claims - 3 or HP = | | | | | | | | | | |
| HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets | | | | | | | | | | |
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| 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets | HP = highest number of independent claims paid for, if greater than 3. | | | | | | | | | |
| listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets | 3. APPLICATION SIZE FEE | | | | | | | | | |
| sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) - 100 = / 50 = (round up to a whole number) x = 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Terminal Disclaimer \$130 SUBMITTED BY Registration No. (Attorney/Agent) 32,843 Telephone (360)692-4506 | If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer | | | | | | | | | |
| Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Terminal Disclaimer \$130 SUBMITTED BY Registration No. (Attorney/Agent) 32,843 Telephone (360)692-4506 Registration No. (Attorney/Agent) 32,843 Telephone (360)692-4506 Telephone (360)692-4506 Telephone (360)692 | sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). | | | | | | | | | |
| A. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Terminal Disclaimer SUBMITTED BY Signature Registration No. (Attorney/Agent) 32,843 Telephone (360)692-4506 | Total Sheets | | | | | | | | | |
| Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Terminal Disclaimer \$130 SUBMITTED BY Signature Registration No. (Attorney/Agent) 32,843 Telephone (360)692-4506 | | | | | | | | | | |
| Other (e.g., late filing surcharge): Terminal Disclaimer \$130 SUBMITTED BY Signature Registration No. 32,843 Telephone (360)692-4506 | 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$) | | | | | | | | | |
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| Registration No. 32,843 Telephone (360)692-4506 | SUBMITTED BY | | | | | | | | | |
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Docket Number (Optional) MED/US-53

| In re Application of: Peter | r V. Czipott, et al. | | | | | | |
|--|---|-------------------------------------|--|--|--|--|--|
| Application No.: 10/723,4 | Application No.: 10/723,457 | | | | | | |
| Filed: 11/25/2003 | | | | | | | |
| For: Screening Method ar | For: Screening Method and Apparatus | | | | | | |
| The owner*, MedNovus, Inc. & Quantum Magnetics, Inc. , of 100 percent interest in the instant application hereby disclaims, except as provided below, the terminal part of the statutory term of any patent granted on the instant application which would extend beyond the expiration date of the full statutory term of any patent granted on pending reference Application Number 10/757.029 , filed on 0/1/13/2004 , as such term is defined in 35 U.S.C. 154 and 173, and as the term of any patent granted on said reference application may be shortened by any terminal disclaimer filed prior to the grant of any patent on the pending reference application. The owner hereby agrees that any patent so granted on the instant application shall be enforceable only for and during such period that it and any patent granted on the reference application are commonly owned. This agreement runs with any patent granted on the instant application and is binding upon the grantee, its successors or assigns. | | | | | | | |
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| I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. 2. The undersigned is an attorney or agent of record. Reg. No. 32,843 | | | | | | | |
| | MW Same | March 8, 2005 | | | | | |
| | Signature | Date | | | | | |
| | Gerald W. Spinks | | | | | | |
| | Typed or printed name | | | | | | |
| | | (360)692-4506 Telephone Number | | | | | |
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| Terminal disclaimer fee under 37 CFR 1.20(d) is included. | | | | | | | |
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